

STATE OF HAWAII
“COMFORT CARE ONLY - DO NOT RESUSCITATE” (CCO-DNR)
INFORMATION PACKET

WHAT IS A CCO-DNR ORDER?

A “Comfort Care Only - DNR” order is the legal declaration of a terminally ill patient’s order to all emergency medical services personnel, first responder personnel, and health care providers to provide the patient with comfort care measures only and to NOT attempt to resuscitate the patient should the patient’s heart or breathing stop.

Comfort care measures include pain medication, oxygen, suctioning fluid from a patient’s mouth to prevent choking, splinting fractures, and other measures designed to make the patient more comfortable.

Comfort care measures DO NOT include attempts to resuscitate the patient such as chest compressions, administering electrical shocks, putting a tube in the throat, and providing artificial breathing for the patient, or trying to restart the patient’s heart or breathing.

WHO CAN GET A CCO - DNR ORDER?

Any person who has attained the age of eighteen or over who is certified in writing by his or her doctor to be terminally ill, who has the capacity (as determined by that doctor) to understand the nature and consequences of the CCO-DNR order, and who has the certification witnessed (signed) by a third person.

WHO CAN FOLLOW CCO - DNR ORDERS AND WHEN?

Beginning July 1, 1995, the State of Hawaii “Comfort Care Only - Do Not Resuscitate” program will be statutorily established and will be effective for terminally ill patients who have consulted with their physician and meet the necessary requirements stated in the preceding section. A CCO-DNR order is effective whenever the CCO-DNR necklace/bracelet is worn and is to be honored by Emergency Medical Services Personnel (defined as any Mobile Intensive Care Technician or Emergency Medical Technician who is certified or licensed by the State), First Responder Personnel (defined as persons, such as firemen and lifeguards, who have successfully completed a United States Department of Transportation-approved First Responder Course of training in emergency basic life support), and State of Hawaii licensed health care providers, such as doctors, nurses, Hospice and nursing home personnel.

HOW WILL THE CCO-DNR ORDER WORK?

The patient will request a CCO-DNR order form from their physician. The patient and physician then discuss the dying process and how the CCO-DNR order will work. After everything is discussed and the patient is fully aware of the nature and consequences of his/her actions and has no further questions, the physician fills out a CCO-DNR form and the physician, patient, and a witness who personally knows the patient sign the form. The physician will keep one copy with the patient's medical record. The other copies will be given to the patient. The patient sends one form to the bracelet/necklace supplier. The patient also keeps a copy of the form for his or her personal records. The necklace/bracelet supplier sends their copy of the form to the State EMS Office for monitoring purposes.

Upon receipt of the necklace or bracelet, the patient puts the bracelet or necklace on. When EMS personnel, First Responder personnel, or other health care providers encounter a patient wearing the necklace/bracelet, they will follow CCO protocols which include providing comfort care only, not initiating CPR, and discontinuing resuscitative efforts if they had already been initiated.

ROLE OF THE BASE STATION PHYSICIAN

The Base Station physician will receive the communication from EMS personnel regarding the patient wearing the CCO-DNR bracelet, a history and physical exam, and a summary of comfort measures already provided. The physician may choose to give additional orders other than those outlined in the state EMS protocols.

ROLE OF THE PATIENT'S PHYSICIAN

The patient's physician should speak to the terminally ill patient about the CCO-DNR order and explain the dying process and how the CCO-DNR order will work. The physician should also give this information to family members agreed to by the patient. After everything has been fully explained to the patient and the patient is fully aware of the nature and consequences of his/her actions and has no further questions, the physician will fill out the CCO-DNR form and the patient will sign this form along with the physician and an adult witness who personally knows the patient. The physician will then keep a copy of the form in the patient's file.

The patient may revoke their CCO order at any time simply by removing the bracelet or by conveying their change of mind to EMS personnel, First Responders, or

other health care providers.

**GUIDELINES FOR CONSIDERATION BY EMS PERSONNEL, FIRST RESPONDERS,
AND OTHER HEALTH CARE PROVIDERS (Both Individuals and Organizations)
WHEN THEY SEE THE CCO BRACELET OR NECKLACE**

If a patient is wearing a State-approved CCO bracelet or necklace and it is properly filled out with engraving of the essential information on the back, then EMS personnel, First Responders, and other health care providers shall follow normal treatment guidelines and protocols for any health condition or symptoms the patient may have, EXCEPT that if the patient's heart stops (no pulse) or breathing stops they are not to administer any medication or perform procedures to restart the heart or breathing.

Because there may exist "gray" conditions such as imminent (but not current) loss of pulse and/or breathing, EMS personnel must be prepared for these situations. It should be remembered that the purpose of the CCO-DNR order is to provide comfort care only and not to prolong the dying process.

Q: What should the EMS personnel/First Responder/Health Care provider do if they see a CCO-DNR necklace or bracelet on the patient, and the patient is breathing and has a pulse?

A: They should follow their standing orders or call the Base Station Physician for further orders.

Q: What if the patient has not yet lost his pulse or stopped breathing, but appears to be in imminent danger of losing his pulse or stop breathing?

A: Do not intubate or electrically shock or do chest compressions on the patient. Oxygen, sectioning, splinting, establishing an IV for pain needs, and other comfort measures can be performed.

Q: Should an EMS personnel/First Responder/Health Care provider ever intubate or chest compress or electrically shock a patient with a CCO-DNR necklace or bracelet who DOES NOT have a pulse and/or is not breathing?

A: No, unless the patient expressed he changed his mind to the personnel/Responder/provider, or if the personnel/Responder/provider believes in good faith

that the provider's safety, the safety of the family or immediate bystanders, or the provider's own conscience requires the patient to be resuscitated. In the latter case, the personnel/Responder/provider may attempt to resuscitate the patient and neither the provider, the ambulance service, nor any other person or entity shall be liable for attempting to resuscitate the patient against the patient's will.

Q: Should EMS personnel/First Responder/Health Care provider ever intubate, chest compress, or electrically shock a patient with a CCO-DNR necklace or bracelet who DOES have a pulse and/or is breathing?

A: No, unless the patient expresses that he has changed his mind to the personnel/Responder/provider, or if the personnel/Responder/provider believes in good faith that the provider's safety, the safety of the family or immediate bystanders, or the provider's own conscience requires the patient to be resuscitated. In the latter case, the personnel/Responder/provider may attempt to resuscitate the patient and neither the provider, the ambulance service, nor any other person or entity shall be liable for attempting to resuscitate the patient against the patient's will.

The reasoning behind the above statement is as follows. The CCO-DNR law includes the following language regarding the terminally ill patient wearing the CCO-DNR necklace or bracelet: "... he directs emergency personnel, first responder personnel, and health care providers to not administer chest compression, rescue breathing, electric shocks, and/or medication given to start the heart if his breathing or heart stops, **and** [emphasis added] directs that he is to receive care for comfort only, including oxygen, airway suctioning, splinting of fractures, pain medicine, and other measures required for comfort.

In this statutory language, the patient is making two directives; First, that he is not to be resuscitated if his breathing/heart stops, and second, that he is to receive comfort care only. This second directive would serve no purpose if the patient had to be pulseless and not breathing for the second directive to be followed - he would rapidly decompensate to an unconscious state and be beyond the need for comfort care - where is the comfort care in that setting? For these reasons, terminally ill people wearing the CCO-DNR bracelet or necklace should not be intubated, compressed, or electrically shocked.

When the EMS personnel are not sure about what to do, they are to contact the Base Station physician for consultation and orders. When First Responder/Health Care Providers are not sure about what to do, they should contact the patient's private physician.